

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

EVANS FOR WV

ADDRESS (number and street)

50 MOUNTAINEER DR

Check if different  
than previously  
reported. (ACC)

PRICHARD

WV

25555

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00832154

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

STATE ▼ DISTRICT

WV

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of

5. Covering Period

M M /

D D /

Y Y Y Y

2023

through

M M /

D D /

Y Y Y Y

2023

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

EVANS, JONATHAN DERRICK, , ,

Type or Print Name of Treasurer

Signature of Treasurer

EVANS, JONATHAN DERRICK, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

04

14

2023

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office  
Use  
Only**FEC FORM 3**  
(Revised 05/2016)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 2 / 14

Write or Type Committee Name  
**EVANS FOR WV**

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
 01 / 01 / 2023

To:

M M / D D / Y Y Y Y  
 03 / 31 / 2023

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)) ....	15595.90	15595.90
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	15595.90	15595.90
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	5439.35	5439.35
(b) Total Offsets to Operating Expenditures (from Line 14) .....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	5439.35	5439.35
8. Cash on Hand at Close of Reporting Period (from Line 27) .....	10156.55	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

## For further information contact:

Federal Election Commission  
 999 E Street, NW  
 Washington, DC 20463

Toll Free 800-424-9530  
 Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

PAGE 3 / 14

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

EVANS FOR WV

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
01 / 01 / 2023

To:

M M / D D / Y Y Y Y  
03 / 31 / 2023**I. RECEIPTS****COLUMN A**  
Total This Period**COLUMN B**  
Election Cycle-to-Date

## 11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than  
Political Committees

(i) Itemized (use Schedule A).....

8450.00

8450.00

(ii) Unitemized.....

7045.90

7045.90

(iii) TOTAL of contributions  
from individuals ▶

15495.90

15495.90

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees  
(such as PACs).....

0.00

0.00

(d) The Candidate.....

100.00

100.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

15595.90

15595.90

12. TRANSFERS FROM OTHER  
AUTHORIZED COMMITTEES .....

0.00

0.00

## 13. LOANS:

(a) Made or Guaranteed by the  
Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS  
(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING  
EXPENDITURES  
(Refunds, Rebates, etc.) .....

0.00

0.00

15. OTHER RECEIPTS  
(Dividends, Interest, etc.) .....

0.00

0.00

16. TOTAL RECEIPTS (add Lines  
11(e), 12, 13(c), 14, and 15)  
(Carry Total to Line 24, page 4)..... ▶

15595.90

15595.90

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	5439.35	5439.35
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	5439.35	5439.35

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	15595.90
25. SUBTOTAL (add Line 23 and Line 24).....	15595.90
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	5439.35
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	10156.55

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 5 OF 14

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**EVANS FOR WV**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Burns, Shannon, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 07 / 2023	
Mailing Address 18079 Brick Mill Run			Transaction ID : SA11AI.4312	
City Strongsville	State OH	Zip Code 44136	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer WAB Strategic		Occupation CEO		
Receipt For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Cordray, Chris, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 06 / 2023	
Mailing Address 164 Stacey Ann CV			Transaction ID : SA11AI.4234	
City Dripping Springs	State TX	Zip Code 78620	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer ePlus Technologies, Inc		Occupation Architect		
Receipt For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Daher, Estephan, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 06 / 2023	
Mailing Address 4507 Boca Dr			Transaction ID : SA11AI.4164	
City Niceville	State FL	Zip Code 32578	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer Daher Contracting		Occupation President		
Receipt For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00		
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			1750.00	
<b>TOTAL</b> This Period (last page this line number only)..... ▶				

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6 OF 14

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**EVANS FOR WV****A.** Full Name (Last, First, Middle Initial)  
**Deer Financial Services PLLC**

Mailing Address 2413 Ogden Way

City  
LexingtonState  
KYZip Code  
40509FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 31 2023

Transaction ID : SA11AI.4134

Amount of Each Receipt this Period

500.00

☐ Memo Item

To be refunded on the Committee's next filed report.

**B.** Full Name (Last, First, Middle Initial)  
**Fox-Spencer, Belinda, , ,**

Mailing Address 67 Meadow Lane

City  
PeterstownState  
WVZip Code  
24963FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

New River Womens Health

Diagnostic Ultrasonographer

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 11 2023

Transaction ID : SA11AI.4195

Amount of Each Receipt this Period

250.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
**Haught, Warren, , ,**

Mailing Address PO Box 2

City  
SmithvilleState  
WVZip Code  
26178FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 28 2023

Transaction ID : SA11AI.4126

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

1250.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**EVANS FOR WV**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Howell, Tresa, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 13 / 2023	
Mailing Address PO Box 283			Transaction ID : SA11AI.4193	
City Winifrede	State WV	Zip Code 25214	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer David Howell, CPA		Occupation Administrative Assistant		
Receipt For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>King, Jan, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 10 / 2023	
Mailing Address 4994 Trace creek road			Transaction ID : SA11AI.4173	
City Salt rock	State WV	Zip Code 25559	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer Self		Occupation Accounting clerk		
Receipt For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Minerva, William, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 28 / 2023	
Mailing Address 2918 Chena Hot Springs Rd			Transaction ID : SA11AI.4124	
City Fairbanks	State AK	Zip Code 99712	Amount of Each Receipt this Period 1200.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer Retired		Occupation Retired		
Receipt For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1200.00		
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			1700.00	
<b>TOTAL</b> This Period (last page this line number only)..... ▶				

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**EVANS FOR WV**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Moss, Marlene, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 03 / 31 / 2023	
Mailing Address 107 Crestview Dr			Transaction ID : SA11AI.4128	
City Morgantown	State WV	Zip Code 26505	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer Information Requested		Occupation Information Requested		
Receipt For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Rennolds, Cynthia, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 02 / 03 / 2023	
Mailing Address 7055 Greatwood Trail			Transaction ID : SA11AI.4435	
City Alpharetta	State GA	Zip Code 30005	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer Retired		Occupation Retired		
Receipt For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Roach, Kevin, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 01 / 07 / 2023	
Mailing Address 1301 B GOVERNOR COURT			Transaction ID : SA11AI.4369	
City Abingdon	State MD	Zip Code 21009	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer Churchville Tile & Marble		Occupation Business owner		
Receipt For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00		
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			1750.00	
<b>TOTAL</b> This Period (last page this line number only)..... ▶				



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**EVANS FOR WV**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Schlegel, Jonathan, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 01 / 28 / 2023	
Mailing Address 1589 Austin Drive			Transaction ID : SA11AI.4307	
City Columbus	State OH	Zip Code 43220	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer Self		Occupation Attorney		
Receipt For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Schwemmer, Lynda, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 03 / 14 / 2023	
Mailing Address 6062 Shallows Way			Transaction ID : SA11AI.4449	
City Naples	State FL	Zip Code 34109	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer Retired		Occupation Retired		
Receipt For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Stown, Thomas, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 02 / 02 / 2023	
Mailing Address 4310 N Van Nuys Rd			Transaction ID : SA11AI.4512	
City Kingman	State AZ	Zip Code 86409	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer Retired		Occupation Retired		
Receipt For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00		
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			1000.00	
<b>TOTAL</b> This Period (last page this line number only)..... ▶				

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 14

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**EVANS FOR WV**

<b>A.</b> Full Name (Last, First, Middle Initial) Wallentine, Jonathan, , ,			Date of Receipt M M / D D / Y Y Y Y Y 01 / 25 / 2023	
Mailing Address 30292 Grande Vista Ave			Transaction ID : SA11AI.4500	
City Laguna Niguel	State CA	Zip Code 92677	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Occupation Actuary	<input type="checkbox"/> Memo Item	
Name of Employer Jonathan Wallentine		Election Cycle-to-Date 1000.00		
Receipt For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
Full Name (Last, First, Middle Initial)			Date of Receipt	
<b>B.</b> Mailing Address			M M / D D / Y Y Y Y Y	
City	State	Zip Code	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee. C		Occupation	<input type="checkbox"/> Memo Item	
Name of Employer		Election Cycle-to-Date		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
Full Name (Last, First, Middle Initial)			Date of Receipt	
<b>C.</b> Mailing Address			M M / D D / Y Y Y Y Y	
City	State	Zip Code	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee. C		Occupation	<input type="checkbox"/> Memo Item	
Name of Employer		Election Cycle-to-Date		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			1000.00	
<b>TOTAL</b> This Period (last page this line number only)..... ▶			8450.00	

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 14

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**EVANS FOR WV**

**A.** Full Name (Last, First, Middle Initial)  
**EVANS, JONATHAN DERRICK, , ,**

Mailing Address 50 MOUNTAINEER DR

City PRICHARD	State WV	Zip Code 25555
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** H4WV01058

Name of Employer	Occupation
------------------	------------

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 05 / 2023

Transaction ID : SA11D.4541

Amount of Each Receipt this Period

100.00
--------

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y
-------------------------

Amount of Each Receipt this Period

--

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y
-------------------------

Amount of Each Receipt this Period

--

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

100.00
100.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 14

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)  
**EVANS FOR WV**

Full Name (Last, First, Middle Initial)

**A. PAC Management Services LLC**Mailing Address 441 N Lee St  
Ste 100City  
AlexandriaState  
VAZip Code  
22314Purpose of Disbursement  
Compliance Services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		07		2023

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.4118

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Phillips, Andrew, , ,**

Mailing Address 1082 E 41st St

City  
TulsaState  
OKZip Code  
74146Purpose of Disbursement  
Strategic Management Consulting

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2023

FEC Identification Number

C

Amount of Each Disbursement this Period

3000.00

Transaction ID : SB17.4141

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. PhoneBurner**Mailing Address 1968 S Coast Hwy  
Ste 1800City  
Laguna BeachState  
CAZip Code  
92651Purpose of Disbursement  
Phone Services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		20		2023

FEC Identification Number

C

Amount of Each Disbursement this Period

179.00

Transaction ID : SB17.4159

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3429.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 14

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)  
**EVANS FOR WV**

Full Name (Last, First, Middle Initial)

**A. Stripe Inc.**

Mailing Address 354 Oyster Point Blvd S

City  
San FranciscoState  
CAZip Code  
94080Purpose of Disbursement  
Payment Processing Fees

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	3

FEC Identification Number

**C**

Amount of Each Disbursement this Period

402.26

Transaction ID : SB17.4162

☐ Memo Item**B. Twilio Inc.**Mailing Address 375 Beale St  
Ste 300City  
San FranciscoState  
CAZip Code  
94105Purpose of Disbursement  
Digital Management

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	9		2	0	2	3

FEC Identification Number

**C**

Amount of Each Disbursement this Period

310.05

Transaction ID : SB17.4146

☐ Memo Item**c. Twilio Inc.**Mailing Address 375 Beale St  
Ste 300City  
San FranciscoState  
CAZip Code  
94105Purpose of Disbursement  
Digital Management

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	3		2	0	2	3

FEC Identification Number

**C**

Amount of Each Disbursement this Period

7.50

Transaction ID : SB17.4150

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

719.81

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 14

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

EVANS FOR WV

Full Name (Last, First, Middle Initial)

**A. Twilio Inc.**Mailing Address 375 Beale St  
Ste 300

City

San Francisco

State

CA

Zip Code

94105

Purpose of Disbursement  
Digital Management

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	2	3

FEC Identification Number

C

Amount of Each Disbursement this Period

507.00

Transaction ID : SB17.4151

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

507.00

**TOTAL** This Period (last page this line number only).....▶

4655.81